



## SCREENING & SUBMITTAL CHECKLIST

### Commercial Tenant Improvement Additions & Alterations

#### INDEX 1

**Applicant Services Center**

700 Fifth Avenue, Suite 2000

P. O. Box 34019

Seattle, WA 98124-4019

Phone: (206) 684-8850

Hours: M/W/F, 7:30am-5:30pm; T/Th, 10:30am-5:30pm

**Project Number:** \_\_\_\_\_ **MT Number** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Project/Site Address:** \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_

- ☐ **CAM 106 General Standards** ☐ **Other CAMs:** \_\_\_\_\_
- ☐ **CAM 102 Getting Your Use and Building Permit**

**LU Screener (please initial)** \_\_\_\_\_ **OS Screener (please initial):** \_\_\_\_\_

**THIS CHECKLIST HAS BEEN PROVIDED TO ASSIST THE APPLICANT IN PREPARING A COMPLETE APPLICATION. COMPLETE APPLICATIONS CAN BE PROCESSED AND REVIEWED MORE EFFICIENTLY. PLEASE READ AND SIGN THE STATEMENT BELOW.**

**I verify that I am submitting all of the required submittals indicated, as appropriate to this project, on this checklist and I acknowledge that failure to submit all of these requirements may result in my application not being accepted and/or may extend the length of time needed to review the project.**

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**~ PLEASE REFER TO THE STANDARDS FOR FURTHER CLARIFICATION ~**

#### LAND USE CONSIDERATIONS:

Yes	No		Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Change of use from last permit	<input type="checkbox"/>	<input type="checkbox"/>	Project in Overlay District (specify) _____
<input type="checkbox"/>	<input type="checkbox"/>	Use allowed outright			
<input type="checkbox"/>	<input type="checkbox"/>	Use allowed as Conditional Use	<input type="checkbox"/>	<input type="checkbox"/>	SEPA required (DR 23-2000)
<input type="checkbox"/>	<input type="checkbox"/>	Does use exceed maximum size limit for zone	<input type="checkbox"/>	<input type="checkbox"/>	Project in Review District or Landmark
<input type="checkbox"/>	<input type="checkbox"/>	Project requires parking calculations – CAM 241	<input type="checkbox"/>	<input type="checkbox"/>	Changes to façade transparencies
			<input type="checkbox"/>	<input type="checkbox"/>	Last permitted use # _____

#### CONSTRUCTION CONSIDERATIONS:

<input type="checkbox"/>	<input type="checkbox"/>	Change of occupancy from last permit	<input type="checkbox"/>	<input type="checkbox"/>	Deep excavation at property line
<input type="checkbox"/>	<input type="checkbox"/>	Project requires design Professional stamp	<input type="checkbox"/>	<input type="checkbox"/>	Demolition is required – CAM 337
<input type="checkbox"/>	<input type="checkbox"/>	Means of Egress/Exiting covered	<input type="checkbox"/>	<input type="checkbox"/>	Pre-fab steel building – CAM 304
<input type="checkbox"/>	<input type="checkbox"/>	Accessibility/Barrier free design covered	<input type="checkbox"/>	<input type="checkbox"/>	Racks require engineering
<input type="checkbox"/>	<input type="checkbox"/>	Height/Area/Type of construction covered	<input type="checkbox"/>	<input type="checkbox"/>	High Rise, Atrium or Mall – CAM 318
<input type="checkbox"/>	<input type="checkbox"/>	Mixed construction type	<input type="checkbox"/>	<input type="checkbox"/>	High Pile Storage
<input type="checkbox"/>	<input type="checkbox"/>	Project is a substantial alteration – CAM 314	<input type="checkbox"/>	<input type="checkbox"/>	H Occupancies, control areas
			<input type="checkbox"/>	<input type="checkbox"/>	Curtain Walls

<b>OTHER CONSIDERATIONS:</b>			
Req	Prov		
<input type="checkbox"/>	<input type="checkbox"/>	Project in Shoreline – see Index 15	<input type="checkbox"/> <input type="checkbox"/> Stormwater, Grading & Drainage – see Index 14
<input type="checkbox"/>	<input type="checkbox"/>	In ECA – see Index 13	

  

<b>TYPE OF PLANS TO BE SUBMITTED</b>			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Completed DPD coversheets for each set of plans	<input type="checkbox"/> <input type="checkbox"/> Survey (Topo survey with 2' contours if within 2' of height limit or using sloping lot height bonus)
<input type="checkbox"/>	<input type="checkbox"/>	Civil drawings or CSC Plan	

  

<b>ARCHITECTURAL PLANS:</b>			
<input type="checkbox"/>	<input type="checkbox"/>	Basic Plot plan ( <b>if</b> change to site or parking) – CAM 103A, 103	<input type="checkbox"/> <input type="checkbox"/> Floor plan(s)
<input type="checkbox"/>	<input type="checkbox"/>	Schematic Property/Tenant Plan ( <b>if</b> no change to site)	<input type="checkbox"/> <input type="checkbox"/> Health Dept. Information for Food Service
<input type="checkbox"/>	<input type="checkbox"/>	Building ID plan (if more than one building on site)	<input type="checkbox"/> <input type="checkbox"/> Roof plan
<input type="checkbox"/>	<input type="checkbox"/>	Demolition Plan	<input type="checkbox"/> <input type="checkbox"/> Elevation Views
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Architectural notes	<input type="checkbox"/> <input type="checkbox"/> Building Sections
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Land Use notes and documentation	<input type="checkbox"/> <input type="checkbox"/> Reflected ceiling plan ( <b>if</b> changes to ceiling)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Parking Information – CAM 241	<input type="checkbox"/> <input type="checkbox"/> Construction details
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Code Analysis (Land Use and Building)	<input type="checkbox"/> <input type="checkbox"/> Door/window schedule
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Means of Egress/Exiting plan	<input type="checkbox"/> <input type="checkbox"/> Landscape plans – DR 13-92

  

<b>STRUCTURAL PLANS (if structural changes):</b>			
<input type="checkbox"/>	<input type="checkbox"/>	Structural notes	<input type="checkbox"/> <input type="checkbox"/> Cross sections for all structural modifications
<input type="checkbox"/>	<input type="checkbox"/>	Foundation plan(s)	<input type="checkbox"/> <input type="checkbox"/> New mezzanines, raised floor & other structural work
<input type="checkbox"/>	<input type="checkbox"/>	Floor framing plan(s)	
<input type="checkbox"/>	<input type="checkbox"/>	Roof framing plan(s)	
<input type="checkbox"/>	<input type="checkbox"/>	Structural details	

  

<b>MECHANICAL PLANS (if Mechanical permit included)</b>			
<input type="checkbox"/>	<input type="checkbox"/>	Project required design professional Stamp	<input type="checkbox"/> <input type="checkbox"/> Mechanical Plans ( <b>if</b> Mechanical Permit or project includes Fume Hood)
<input type="checkbox"/>	<input type="checkbox"/>	Mechanical notes	<input type="checkbox"/> <input type="checkbox"/> CAM 415

  

<b>ADDITIONAL SUBMITTALS:</b>			
<input type="checkbox"/>	<input type="checkbox"/>	Pre-application Site Visit Report	<input type="checkbox"/> <input type="checkbox"/> Acoustical Study – CAM 118
<input type="checkbox"/>	<input type="checkbox"/>	Copy of Soils Report	<input type="checkbox"/> <input type="checkbox"/> Equipment list and menu for restaurant or food service
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contact Disclosure Form	<input type="checkbox"/> <input type="checkbox"/> Parking Covenant (Site Plan for covenant parking location required)
<input type="checkbox"/>	<input type="checkbox"/>	Financial Responsibility Form	<input type="checkbox"/> <input type="checkbox"/> Documentation required for Established Use for the Records – see CAM 217
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Agent's Letter of Authorization from owner	<input type="checkbox"/> <input type="checkbox"/> Certificate of Approval from Special Review District or Landmark
<input type="checkbox"/>	<input type="checkbox"/>	Structural calculations, stamped ( <b>if</b> structural work or new or replaced mechanical equip.)	<input type="checkbox"/> <input type="checkbox"/> Special Inspection Form(s)
<input type="checkbox"/>	<input type="checkbox"/>	Target UA calculations	<input type="checkbox"/> <input type="checkbox"/> Copy of Pre-submittal minutes
<input type="checkbox"/>	<input type="checkbox"/>	Cooling and heating calculations ( <b>if</b> Mechanical Permit included with this permit)	
<input type="checkbox"/>	<input type="checkbox"/>	Kitchen Hood Worksheet for restaurant ( <b>if</b> hood included with in permit)	

  

<b>NUMBER OF PLANS REQUIRED:</b>			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	4 sets	<input type="checkbox"/> <input type="checkbox"/> 1 additional for Health Department
<input type="checkbox"/>	<input type="checkbox"/>	1 additional for SEPA, Conditional Use, etc.	<input type="checkbox"/> <input type="checkbox"/> 3 additional for Shoreline

[illegible]